

# BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (For additional cross references)

POSITION	INITIALS	ID NO.	DATE
			10/12/00
<b>FEES DETERMINATION</b>	✓		
<b>O.I.P.E. CLASSIFIER</b>			10/18/00
<b>FORMALITY REVIEW</b>	WM	869	11-07-00
<b>RESPONSE FORMALITY REVIEW</b>	A. M	JC - 582	04-07-01

## INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
- (Through numeral)...	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Final	Original	Date
1	✓	✓	10/12/00
2	✓	✓	10/12/00
3	✓	✓	10/12/00
4	✓	✓	10/12/00
5	✓	✓	10/12/00
6	✓	✓	10/12/00
7	✓	✓	10/12/00
8	✓	✓	10/12/00
9	✓	✓	10/12/00
10	✓	✓	10/12/00
11	✓	✓	10/12/00
12	✓	✓	10/12/00
13	✓	✓	10/12/00
14	✓	✓	10/12/00
15	✓	✓	10/12/00
16	✓	✓	10/12/00
17	✓	✓	10/12/00
18	✓	✓	10/12/00
19	✓	✓	10/12/00
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25	✓	✓	10/12/00
26	✓	✓	10/12/00
27	✓	✓	10/12/00
28	✓	✓	10/12/00
29	✓	✓	10/12/00
30	✓	✓	10/12/00
31	✓	✓	10/12/00
32	✓	✓	10/12/00
33	✓	✓	10/12/00
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36	✓	✓	10/12/00
37	✓	✓	10/12/00
38	✓	✓	10/12/00
39	✓	✓	10/12/00
40	✓	✓	10/12/00
41	✓	✓	10/12/00
42	✓	✓	10/12/00
43	✓	✓	10/12/00

Claim	Final	Original	Date
51	✓	✓	
52	✓	✓	
53	✓	✓	
54	✓	✓	
55	✓	✓	
56	✓	✓	
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59	✓	✓	
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89	✓	✓	
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91	✓	✓	
92	✓	✓	

Claim	Final	Original	Date
101	✓	✓	
102	✓	✓	
103	✓	✓	
104	✓	✓	
105	✓	✓	
106	✓	✓	
107	✓	✓	
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130	✓	✓	
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132	✓	✓	
133	✓	✓	
134	✓	✓	
135	✓	✓	
136	✓	✓	
137	✓	✓	
138	✓	✓	
139	✓	✓	
140	✓	✓	
141	✓	✓	
142	✓	✓	